

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3		/				
4		/				
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12	<del>/</del>	<del>/</del>				
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50	<del>/</del>	<del>/</del>				
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	/	/				
52	/	/				
53	/	/				
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99						
100						
TOTAL IND.	6	↓		↓		↓
TOTAL DEP.	9	←		←		←
TOTAL CLAIMS	15					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS